



Fond du Lac County Health Department
160 S. Macy St, Fond du Lac, WI 54935
Phone: 920-929-3085 | Fax: 920-929-3102 | www.fdlco.wi.gov



COVID-19 Release Documentation

To submit a request for release documentation, complete all required boxes below. Once completed, submit via email to health@fdlco.wi.gov with the subject line reading “ATTN: COVID RELEASE REQUEST.” We are only processing requests for residents within Fond du Lac County. You can expect a response in 5-7 business days.

*REQUIRED

FIRST NAME*	LAST NAME*
DATE OF BIRTH*	
STREET ADDRESS*	CITY, STATE, ZIP*
IF TESTED, DATE OF TEST	IF YOU WERE SYMPTOMATIC, WHAT DAY DID SYMPTOMS START?
IF CLOSE CONTACT, LAST DATE OF EXPOSURE	PHONE NUMBER*
EMAIL* Enter your email address carefully – significant delays occur if the email is incorrect.	
<input type="checkbox"/> I do hereby authorize my COVID-19 Health Related Information to be sent electronically to the email I provided in this form. I understand the information on this form will be used to verify my identity, and the email will be sent from the Wisconsin Electronic Data Surveillance System or the Fond du Lac County Health Department. *	
FOR PUBLIC HEALTH USE ONLY	
RELEASE FROM ISOLATION/QUARANTINE DATE:	
CLEAR TO TRAVEL DATE:	